PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or <u>Fax</u> (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notifications	s.		a) specifying a	Hew corres		and or (b) indicating a sep	mate TEE ADDICESS for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Not Fee pape	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
5514 759				have	e its own certificate	e of mailing or transmission.	<u>-</u>	
FITZPATRICK CELLA HARPER & SCINTO OIPE 30 ROCKEFELLER PLAZA NEW YORK, NY 10112					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
	0 3 2006		(Depositor's name)					
		\ #		<i>#</i> /			(Signature)	
	ADEMARY	<i>></i> /			(Date)			
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN				ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/395,993	09/15/1999		ALISON JOAN LENNON			169.1451	6766	
TITLE OF INVENTION: AUTOMATED IMAGE INTERPRETATION AND RETRIEVAL SYSTEM								
_								
APPLN. TYPE	SMALL ENTITY	ISSUE FI	E PUBLIC		CATION FEE	TOTAL FEE(S) DUE	DATE DUE	
- nonprovisional	NO	\$1400)		\$0	\$1400	04/13/2006	
EXAMINER		ART UNIT		CLASS	-SUBCLASS			
BALI, VIKKRAM 2623			382-224000			•	:	
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list								
CFR 1.363).	(1) the names of up to 3 registered patent attorneys 1 Fitzpatrick, Cella or agents OR, alternatively,							
Change of corresponde Address form PTO/SB/12								
"Fee Address" indicati PTO/SB/47; Rev 03-02 or Number is required.	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 Harper & Scinto 3							
	RESIDENCE DATA TO B							
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee of this form is NO	data will appe I a substitute fo	ear on the pa	ntent. If an assign assignmen g3/06/	ee is identified below, the d 2006 MBEYENE2 0000009	ocument has been filed for 17 99395993	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OF COUNTRY) 146							1400.00 OP	
Canon Kabushiki Kaisha				, Jap	15.00 OP			
Please check the appropriate	assignee category or categor	ies (will not be pri	inted on the pa	ntent): 🔲	Individual 🚨 Co	orporation or other private gr	oup entity Government	
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):						-		
☑ Issue Fee	A check in the amount of the fee(s) is enclosed.							
, , , , , , , , , , , , , , , , , , , ,				Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies 5 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1205 (enclose an extra copy of this form).								
5. Change in Entity Status (a. Applicant claims SM	from status indicated above AALL ENTITY status. See 3		b. Applica	ant is no long	ger claiming SMAI	LL ENTITY status. See 37 C	FR 1.27(g)(2).	
The Director of the USPTO is NOTE: The Issue Fee and Pu interest as shown by the recor	s requested to apply the Issu blication Fee (if required) w rds of the United States Pate	e Fee and Publicat ill not be accepted nt and Trademark	tion Fee (if any I from anyone Office.	y) or to re-ap other than th	ply any previousl ne applicant; a regi	y paid issue fee to the applica stered attorney or agent; or the	ntion identified above. ne assignee or other party in	
Authorized Signature John D. Magley				Date March 2, 2006				
Typed or printed name	Registration No. 56,867							
This collection of information an application. Confidentialit submitting the completed app his form and/or suggestions Box 1450, Alexandria, Virgin Alexandria, Virginia 22313-1	for reducing this burden, shais 22313-1450. DO NOT S	1. The information 122 and 37 CFR 10. Time will vary ould be sent to the SEND FEES OR C	n is required to 1.14. This colled depending upon Chief Information COMPLETED	o obtain or rection is estion the individuation Office FORMS TO	etain a benefit by t imated to take 12 r idual case. Any co r, U.S. Patent and D THIS ADDRESS	he public which is to file (and ninutes to complete, includir mments on the amount of the Trademark Office, U.S. Dep SEND TO: Commissioner	I by the USPTO to process) ggathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.